



SSP/EIP Integration: Frequently Asked Questions

Sept. 24, 2012

1. When should the EIS Autism form be submitted by the EIP?

Enter the form into EIS as soon as the referral(s) to the SSP(s) are made . You do not need to update or re-submit the form once the family has selected an SSP for ongoing services. It is important that all SSP referral dates are included, regardless of outcome, so that all autism intake and direct treatment claims are approved for payment when matched against the EIS Autism data.

2. Can the same SSP provider deliver two separate specialty service sessions per day for the same child?

Yes, each individual specialty service session must be reported to DPH and will be approved as long as each session is 3.00 hours or less. However, when billing insurers, you will need to know the insurers requirements so that services are not denied as duplicates.

3. Can I bill all autism services to DPH if a child has a commercial insurer?

The Department's expectation is that programs contact provider relations at the child's insurance company to discuss and establish protocols for billing for intensive services. Most commercial insurers will require a prior authorization and each insurer will have its own requirements for billing procedures. EI programs may send autism service charges to DPH prior to third party billing confirmations being in place. DPH is currently relaxing some of its business rules on autism services. However, for services sent after December 10, 2012, DPH will be implementing business rules that will affect payment of autism charges for children having a commercial insurer which may result in services being pended.

4. Can services ever exceed six hours per day?

Yes. MassHealth allows sessions of up to three hours, with a maximum of six hours per day and a maximum of 30 hrs per week. If a MassHealth child exceeds the MassHealth maximum of six hours per day, the program should bill DPH directly for services over six hours.

DPH and private health plans allow sessions of up to three hours with a maximum of 30 hours per week.

5. Are supervision hours included in the maximum number of hours per week?

Yes, autism intake, direct treatment, and supervision hours are included in the maximum number of hours per week.

6. Is there any required amount of overlap between EI and SSP staff?

No – there is no required amount of overlap. All overlap visits between EI and SSP staff should have a clear, clinically justifiable purpose.

7. Will autism specialty service providers appear on an EI Program's staff list?

Specialty providers for autism will not appear on individual EI Staff lists because there is no way to predict which EI programs individuals in the various Specialty Service Provider agencies will be assigned to. EIPs will continue to receive copies of Provisional Certification forms for these staff from the SSPs when staff are assigned to children in their EIPs.

8. If a child's specialty services are provided in a childcare setting and the child's insurer only reimburses for ABA services if the parent is present, should the claim go to the private insurer, get denied, and then go to DPH or should it go straight to DPH when we know something is not authorized?

If a claim is submitted to an insurer under a certain procedure code the program is attesting to the fact that the service was provided according to the insurer's policy. If this is not the case then the program cannot bill this service to the insurer. Therefore, the program should bill these services directly to DPH and include information in the child's record about the reason. DPH may begin to pend these services with the expectation that providers submit additional information about these services.

9. With regard to re-evaluation, right now SSPs are required to conduct concurrent re-evaluations every 3-6 months under ARICA per individual insurance providers. What will be the requirements under EI?

DPH and MassHealth do not require concurrent re-evaluation. Each health plan will specify its particular requirements.